

TO BE ANSWERED BY
NEAREST FRIEND

Charity Bellows

CERTIFICATE OF

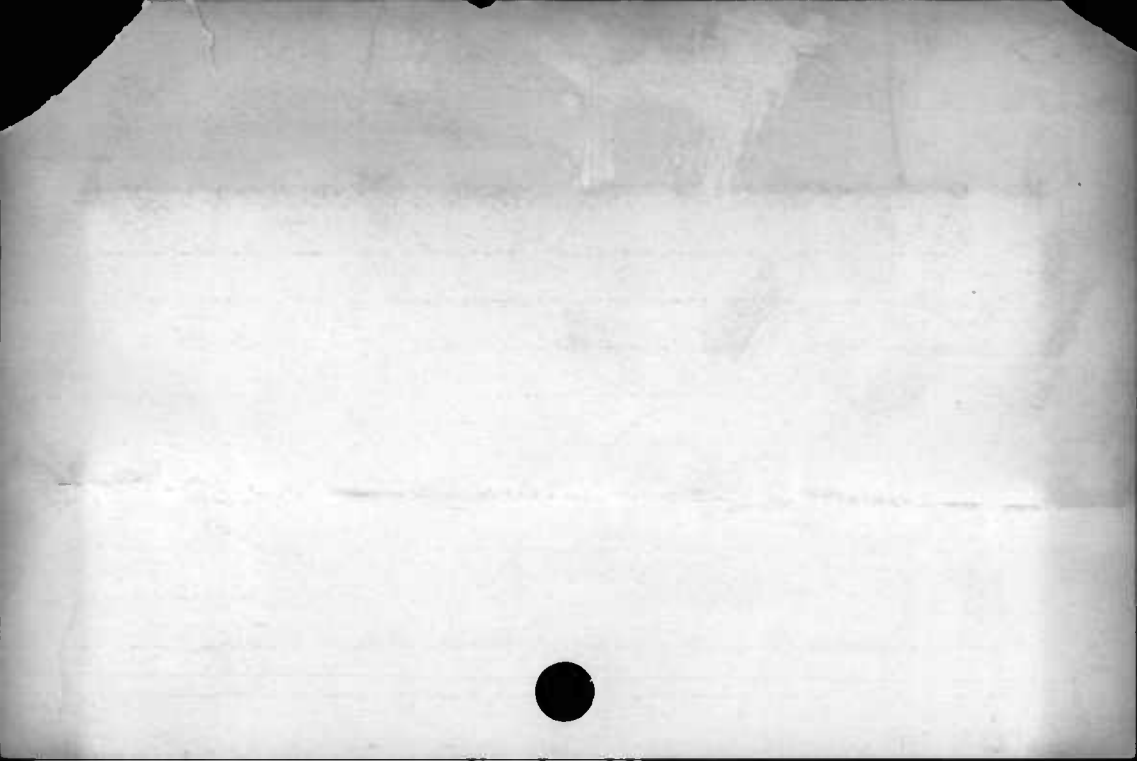
MARYLAND

Died at		Town Leesville		County Montgomery			
Date of death 190	2	Month June	Day 26	Age	20	Months	Days
Sex	Female		Color or Race	Colored		Birth-place	Maryland
Married, Single or Widowed Married				Occupation None			
Name of Wife or Husband							
Father's Name William Bellows				Father's Birthplace Md.			
Mother's Maiden Name Alice Boston				Mother's Birthplace "			
Name of person giving information William Bellows				How related to deceased Father			

CAUSES OF DEATH

PHYSICIAN
OR CORONER

Primary	Pulmonary Tuberculosis		How long	A few months
Immediate	Asphyxia		How long	27
Are the name, age, sex, color, date and place correctly given above?		Signature of Physician J. H. Brown		
Yes		Address Burnt Mills Md.		
Accident or Suicide?				



George Francis Blair

Town

County

Died at

Sandy Spring

Montgomery

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

6

13

Age

78

10

Maryland

Laborer

Male

~~White~~~~Married~~~~Widow~~

Divorced

~~Female~~

Colored

~~Single~~

Widower

Number of children living, 4

Husband

of

Marion Louisa Carroll

Wife

Father's

Mother's

Name

Name

Cause of

Primary

Tuberculosis

27

How long sick

5 years

Death

Immediate

Tuberculous pneumonia

Accident, Suicide, Homicide

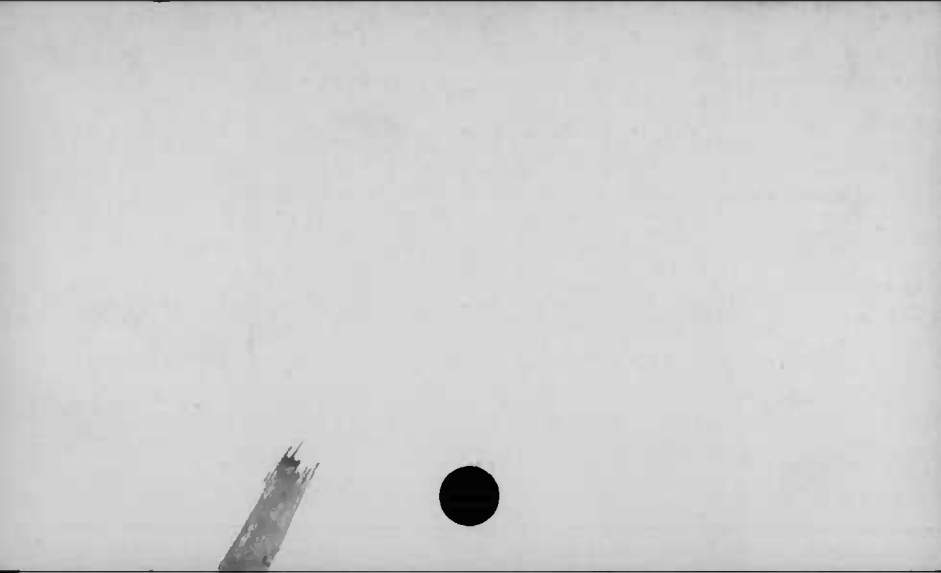
Reported by

Roger Burke, M.D.

Address

Sandy Spring Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

George Francis Blair

Town

County

Died at

MARYLAND

Sandy Spring Montgomery

Date	1902 June 12	Age	78-10 -	Native of	Montg. Co. Coochman
Male	White	Married	Widow	Divorced	
Female	Colored	Single	Widower	Number of children living	4

Husband

of

Louisa Blair

~~Wife~~

Father's

Name

Henry Blair

Mother's

Name

Henrietta Blair

Cause of

Primary

Chronic Dysentery 14

How long sick

Five years

Death

Immediate

Asthenia

Accident, Suicide, Homicide

Reported by

Robert H. Blair, son, per H. O.

Address

Sandy Spring, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78709



William S. Brooke

Town

County

Died at Onkdale

Montgomery

MARYLAND

Date 1902 Month 8 Day 24 Age 66 Y. M. D. 4 Native of Maryland Occupation

Male

White

Married

Widow

~~Divorced~~~~Female~~~~Colored~~~~Single~~

Widower

Number of children living 1

Husband of Mary L. Coffin

Father's Name Roger Brooke

Mother's Name Sallie Pleasant Brooke

Cause of Primary Progressive Paralysis

How long sick 4 years

Death Immediate Paralysis

~~Accident, Suicide, Homicide~~

Reported by Roger Brooke

Address Sandy Spring Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Henry Fletcher Brown

Died at ^{Town} Bethesda ^{County} Mont. MARYLAND

Date 1902 6 18 Age 4-1 Native of U. S. Occupation

Male White Married

Father's Name Unknown Mother's Name Unknown

Cause of Death { Primary Pulmonary Tuberculosis
Immediate Failure of Heart

How long sick
Accident, Suicide, Homicide

Reported by Alfred G. Gascok, M.D. 29

Address Resident Physician of Foundling Hospital

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Mary Elizabeth Brown
 Town County

Died at Springtown Brown MARYLAND

Date 1902 June 1 Age 5 Native of Ind Occupation
 Male White Married Widow Divorced
 Female Colored Single Widower Number of children living

Husband of Garfield Brown
 Wife
 Father's Name Garfield Brown Mother's
 Name Maiden Name

Cause of Primary How long sick 151
 Death Immediate Accident, Suicide, Homicide

Reported by.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Granville Campbell.
 Town County
 Died near Mt. Lion Montgomery MARYLAND
 Date 1902 June 19 Age 24 - - -
 Male White Married Widow Divorced
 Female Colored Single Widower
 Occupation Farm hand
 Number of children living -

Husband
 of
 Wife

Father's Name John Campbell Mother's Name Harrietta Brown
 Cause of Death { Primary Heart disease
 Immediate Heart failure
 How long sick Half hour
 Accident, Suicide, Homicide

Reported by Chas. Farguhar, M. D.
 Address Grey, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79893



George H Carter

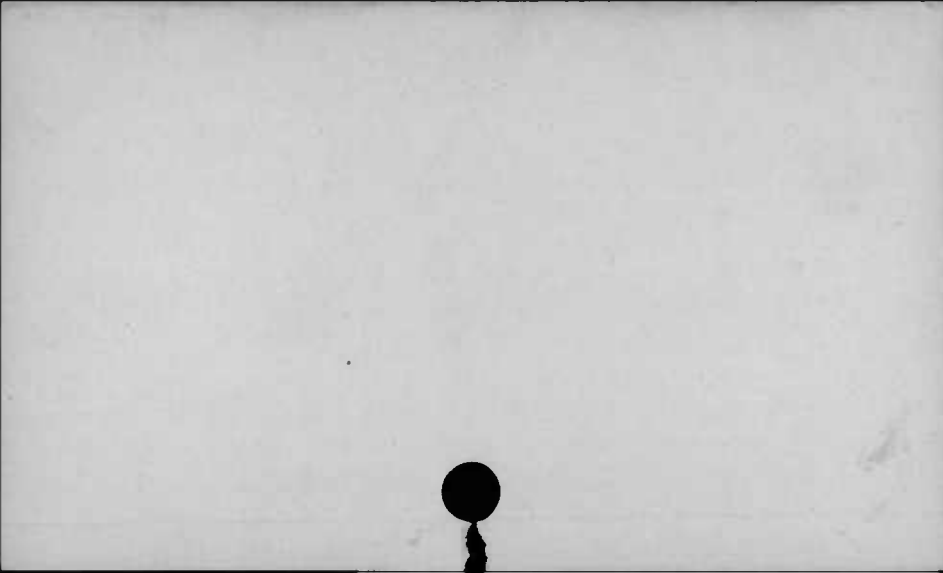
Died at Poolsville Montgomery MARYLAND
 Town County
 Date 1902 June 8 Age 79, 8, 22 Native of md Occupation farmer
 Month Day Y. M. D.
 Male White Married Widow ~~Divorced~~
~~Female~~ Colored ~~Single~~ Widower Number of children living 4

Husband of Elizabeth Ulmbach
 Wife
 Father's Name Henry Carter Mother's Maiden Name Sarah Redman

Cause of Death { Primary Immediate Bright's Disease How long sick 3 years
Accident, Suicide, Homicide

Reported by J. S. Poole 1020
 Address Poolsville md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Mary Dimes

Town

County

Died at

Germanstown

Montgomery

MARYLAND

Date 1902

Month

Day

Y.

M.

D.

Native of

Occupation

6 18

Age 13

Md.

~~Male~~~~White~~~~Married~~~~Widow~~~~Divorced~~

Female

Colored

Single

~~Widower~~

Number of children living

Husband
of

Wife

Father's
Name

Nathan Dimes

Mother's
Maiden Name

Eunice Powell

Cause of

Primary

Typhoid Fever

How long sick

2 Wks

Death

Immediate

Toxemia

~~Accident, Suicide, Homicide~~

Reported by

L. F. Wilson M. D.

Address

Germanstown

Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Rachel Louise Hackett

Town

County

Died at

Mt. Zion

Montgomery

MARYLAND

Date 1902 June 9

Month

Day

Y.

M.

D.

Native of

Occupation

Age

1-6

Montg. Co.

~~Male~~

White

Married

Widow

~~Divorced~~

Female

Colored

Single

Widower

Number of children living

Husband
of
WifeFather's
Name

Joseph Hackett

Mother's
Name

Victoria Johnson

Cause of

Primary

Contusion of Brain

How long sick

Two days

Death

Immediate

Accident, Suicide, Homicide

Reported by

Parent, Joseph Hackett

Address

Grifton Montg. Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Rachel Louise Hackitt

Certificate of Death

Died at		Town Beth Zion		County Montgomery			MARYLAND	
Date 1902		Month June	Day 9	Y. 1	M. 6	D.	Native of	Occupation
Male		White		Married		Widow		Divorced
Female		Colored		Single		Widower		Number of children living
Husband of		Ido.						
Wife								
Father's Name		Joseph Hackitt			Mother's Maiden Name		Victoria Johnson	
Cause of Death	Primary	Injury from fall on head					How long sick about two days	
	Immediate	Contusion of Brain					Accident, Suicide , Homicide	
Reported by		W. H. Dyson M.D.						
Address		Laytonsville Montgomery						

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Paul Henrich 74
 Died at Bethesda ^{Town} ^{County} Mont. MARYLAND
 Date 1902 6 27 Month Day Y. M. D. Age - 3 - Native of U.S. Occupation
 Male White ~~_____~~ ~~_____~~ ~~_____~~ ~~_____~~

Father's Name Unknown Mother's Maiden Name Unknown
 Cause of Death { Primary Cerebral Abscess How long sick 6 days
 Immediate Asthenia ~~_____~~, ~~_____~~, ~~_____~~
 Reported by Alfred Hassock, M.D.
 Address Resident Physician of Formaling Hospital
 Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Estella May Johnson

Town

County

Died near Norbeck Montgomery

MARYLAND

Date 1902 June 1 Y. M. D. Age - 3 - Native of Md Occupation

Male White Married Widowed Divorced

Female Colored Single Widower Number of children living

Husband of

Wife

Father's Name John E. Johnson Mother's Name Emma May Johnson

Cause of Death Primary Pneumonia Immediate Asthenia

How long sick 3 days

Accident, Suicide, Homicide

Reported by R. Lee, Farquhar, M.D.,

Address Olney Montg. Co., Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full Flurence May Lewis
 Town Beltsville County Montgomery
 Died at Beltsville MARYLAND
 Date 19 02 Month 6 Day 11 Age 4-13 Native of Germany
 Male Male White White Married Married Widow Widow Divorced Divorced
 Female Female Colored Colored Single Single Widower Widower Number of children living Number of children living
 Husband of _____
 Wife _____
 Father's Name Unknown Mother's Name Unknown
 Cause of Death { Primary Hereditary Specific Disease Immediate Exhaustion }
 How long sick _____
 Accident, Suicide, Homicide _____
 Reported by Henry Robbins MD
 Address 1750 M St. N.W.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Died at Durham Town Salisbury County Sevent. MARYLAND
 Date 19 02 Month 6 Day 12 Y. 7 M. 7 D. 7 Native of American Occupation
~~Male~~ White ~~Married~~ Widow ~~Divorced~~
Female ~~Colored~~ Single ~~Widower~~ Number of children living

Husband
of
Wife

Father's Name Andrew Mother's Maiden Name Martha

Cause of Death { Primary Hereditary Specific Disease How long sick
 Immediate Exhaustion Accident, Suicide, Homicide

Reported by Henry A. Robbins MD 26

Address 1750. N. H. N. W.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Martha E. Morris

Died at ^{Town} Beane ^{County} Montgomery MARYLAND

Date 1902 ^{Month} 6 ^{Day} 1 ^{Y.} 63 ^{M.} 8 ^{D.} 17 ^{Native of} Md. ^{Occupation} Housewife
~~Male~~ ^{White} ~~Married~~ ~~Widow~~ ~~Divorced~~
^{Female} ~~Colored~~ ~~Single~~ ~~Widower~~ ^{Number of children living} 3

~~Husband~~ of F. Morris
Wife
Father's Name ✓ Mother's Name - no

Cause of { Primary Chronic Brights
Death { Immediate Heart Failure
How long sick 2 weeks
Accident, Suicide, Homicide

Reported by John L. Lewis M.D.
Address Rochester, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Dulcie Estelle Moyley

Town

County

Died at Near Kemptown Montgomery

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 1902 June 19/1 Age 13. 10. 19

~~Male~~

White

~~Married~~

Widow

Divorced

Female

~~Colored~~

Single

Widower

Number of children living

Husband of

Wife

Father's

Name

Mother's

Maiden Name

Cause of Primary

Death Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79885

111



Name in Full

Certificate of Death

George W. Parsley

Town

County

Died at

Brooksville

Montgomery

MARYLAND

Date

1902

Month

Day

June 15

Y.

M.

D.

Age

80 2 25

Native of

Montg. Co. Sharmaker.

Occupation

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

One

Husband

of

Mrs. Susan R. Parsley

Wife

Father's

Name

James Parsley

Mother's

Name

Margaret Parsley

Cause of

Primary

Cerebral Hemorrhage

How long sick

3 1/2 days

Death

Immediate

Accident, Suicide, Homicide

Reported by

W. F. Green, M.D.

Address

Brooksville, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706



Moulton Phoenix
 Town County

Died at Brooksville Mount Vernon

MARYLAND

Date 1902 June 5 Y. M. D. 17 - - Native of Md Occupation Farm hand
 Male White Married Widow Divorced
 Female Colored Single Widower Number of children living

Husband
 of
 Wife

Father's Name Beverly Phoenix

Mother's Name Mary Tobitta Phoenix

Cause of Primary Phthisis

How long sick 4 months

Death Immediate Asthenia

Accident, Suicide, Homicide

Reported by Dr. W. F. Green per H. Q.

Address Brooksville Md.



Name in Full		Mellie Snowden	
Died at		Town Mt. Zion	County Montgomery
Date		Month June	Day 28
Age		Y. 16	M. D. - -
Native of		Montg. Co. Md.	
Occupation		Laborer	
Male		White	Married
Female		Colored	Single
Widow		Divorced	
Widower		Number of children living	
Husband of		X	
Wife		X	
Father's Name		John Wesley Snowden	
Mother's Name		Addie F. Snowden	
Cause of		Primary	Tuberculosis
Death		Immediate	How long sick About 8 months
Reported by		Dr. W. F. Green for the O. by request	
Address		Brookville, Md.	
Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.			



Richard Williams

Town

County

Died at

MARYLAND

Date 19

Month

Day

Y.

M.

D.

Native of

Occupation

02

6

5

Age

62

-

-

Md

Laborer

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widow

Number of children living

1

Husband

of

Wife

Father's

Name

Mother's

Maiden Name

Cause of

Primary

Acute Indigestion

How long sick

1 week

Death

Immediate

Valuable Heart Disease

Accident, Suicide, Homicide

Reported by

Address

O. M. L. H. C. J. M. 1

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

